

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on September 19, 2003.

## **I. DISPUTE**

Whether there should be reimbursement for out-of-pocket expenses for prescription medications for dates of service May 9, 2003 through September 15, 2003.

## **II. RATIONALE**

EOB's were not submitted by either party; therefore, this dispute will be reviewed as a general fee dispute.

Per Rule 133.307(f)(2) for date of service September 15, 2003 the requestor did not submit a paid receipt; therefore, reimbursement is not recommended.

The requestor submitted receipts for dates of service May 9, 2003 and August 5, 2003 showing payment for this medication. However, According to Texas Workers' Compensation Commission Rule 133.307 (f)(3), the requestor has not submitted any EOBs relevant to the dispute or convincing evidence of the carrier receiving the employee's request for reimbursement; therefore, reimbursement is not recommended.

## **IV. DECISION**

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is entitled to reimbursement for out-of-pocket expenses for prescription medications.

The above Findings and Decision are hereby issued this 06th day of January 2004.

Marguerite Foster  
Medical Dispute Resolution Officer  
Medical Review Division

MF/mf